Nigeria is Africa’s most populous nation, with a population of approximately 140 million people. Modern contraceptive services are underutilized in Nigeria which has a modern contraceptive prevalence rate (CPR) of 11 percent. The country’s low CPR highlights the need for innovative programs to increase women’s access to contraceptive services.

In Nigeria, the majority of contraceptive services are offered in private settings, including Patent Medicine (PM) shops. PM shops are informal businesses owned by Patent Medicine Vendors (PMVs) licensed to sell patent or propriety drugs. PMVs sell a range of contraceptive commodities including male and female condoms, emergency contraceptives, pills, and intrauterine devices.

Injectable contraception is the most popular modern method in Nigeria, accounting for 30 percent of current modern contraceptive users. Current regulations do not permit PMVs to sell or administer injectable contraceptives because PMVs do not currently receive formal training. Instead, they can only refer clients to health facilities for injection sale and administration. Nevertheless, some PMVs are selling and administering injectable methods in response to high demand for them.

Given this situation, now is an opportune time to generate evidence that can drive policy action to formally train and engage PMVs in the provision of safe injectable contraceptive services as a key strategy in increasing women’s access to contraceptive methods.

**STUDY OBJECTIVES**

The Evidence Project, in collaboration with the Federal Ministry of Health (FMOH), is conducting implementation research to:

1. Demonstrate the feasibility of PMVs administering all available forms of injectable contraception, including Depo Provera (DMPA) and Sayana® Press.

2. Understand women’s experiences using DMPA or Sayana® Press, including the quality of care they receive when accessing injectable contraceptive services from PMVs.

The FMOH also asked the Evidence Project to develop and coordinate training of PMVs so that they have the necessary skills and information to sell, counsel, and refer for all contraceptive methods, as well as administer all injectable contraceptives, including DMPA and Sayana® Press.

The study is taking place in two states: Oyo in the southwest and Nassarawa in north central Nigeria. In each state, four Local Government Areas (LGAs) will be selected as the study sites (two urban and two rural) for a total of eight LGAs.
**THE PILOT INTERVENTION**

PMVs who volunteer to participate in the study will take part in a five-day, participatory training on providing information and counseling to clients on all family planning methods and on administering injectable contraceptives. The training will cover the differences between intramuscular and subcutaneous injectable contraceptives (see Box); their safe storage and administration; and counseling women on side effects, when to return for the follow-up injection, and what to do if an adverse event occurs.

The research team will establish or strengthen relationships with a number of stakeholders, including the National Association of Patent and Proprietary Medicine Dealers (NAPMED) whose members will help recruit PMVs for the study, review training materials and participate in the training, and interpret the study’s findings. The team will also work with local government health facilities in the eight LGAs to ensure the acceptance of referrals by PMVs. Additionally, FMOH and LGA health staff will be involved in the planning, implementation, and training of PMVs. To reduce the likelihood of stock-outs of DMPA and Sayana® Press, the team will work with SFH and DKT to ensure a steady supply. Because the type of injection is subcutaneous, the needle is smaller and thus less painful.

**HOW THE DATA ARE BEING COLLECTED**

**Pre- and post-PMV training surveys**

The PMVs will complete a survey pre- and post-training to ascertain changes in knowledge and practices related to injectable contraceptives. Additionally, follow-up surveys will be administered at three, six, and nine months post-training to assess the PMV’s practices, knowledge and skills over time.

**Monthly monitoring/supervision of PMVs**

Teams of study investigators and Ministry of Health officials will monitor activities of trained PMVs through monthly follow-up meetings to identify and resolve implementation issues. The monitoring visits will track progress, challenges, and successes of implementation as well as gather information on clients’ experience of adverse events.

**Client exit interviews and surveys**

To obtain female clients’ perspectives, the researchers will conduct exit interviews at PM shops of trained PMVs. They will also recruit and follow over time a cohort of DMPA and Sayana® Press users receiving services from trained PMVs, enabling the assessment of continuation rates of injectable contraceptive methods.

**FOSTERING RESEARCH UTILIZATION**

The research team will engage key decision makers, such as the FMOH and state and LGA health officials, from the beginning of the study; utilize technical working groups to discuss emerging findings and lessons; and identify champions to promote the study findings to key stakeholders, such as health officials, NAPMED, PMVs, Pharmacy Council of Nigeria, donors, NGOs, etc. A national dissemination meeting will be held in Abuja with the key stakeholders to review and interpret the results and identify how they can be translated into policy. State level meetings also will be held to share implementation successes and challenges to PMV delivery of injectable contraceptive services.

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**Injectable Contraceptive Methods**

There are two types of injectable hormonal contraceptives: those that are injected intramuscularly, like DMPA, and those that are injected subcutaneously, like Sayana® Press. In Nigeria, intramuscular injections were the only available option for women wishing to use injectable contraception until 2014 when Sayana® Press was introduced as a second safe and efficacious option. Sayana® Press comes as a single dose in a prefilled, sterile syringe, and is administered once every three months. It is packaged in the Uniject injection system with an autodisposable device that eliminates the need to prepare a needle and syringe. Because the type of injection is subcutaneous, the needle is smaller and thus less painful.

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For more information, go to evidencelibrary.popcouncil.org or contact Salisu Ishaku at sishaku@popcouncil.org

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